

16441

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	08/444,791	
	Filing Date	05/19/1995	
	First Named Inventor	Manfred Brockhaus	
	Art Unit	1644	
	Examiner Name	R.B. Schwadron	
Total Number of Pages in This Submission	2	Attorney Docket Number	13140 US3

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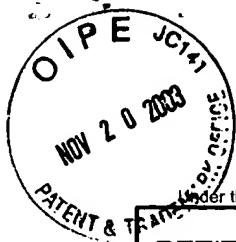
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 13140 US3																
<div style="border: 1px solid black; padding: 5px;">DEPOSIT ACCOUNT NO. 08-2525 OUR ORDER NO. 5187</div>		In re Application of Brockhaus et al.																
		Application Number 08/444,791	Filed May 19, 1995															
		For HUMAN TNF RECEPTOR																
		Group Art Unit 1644	Examiner R. B. Schwadron															
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table><tr><td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>(\$110.00)</td><td>\$ <u>110.00</u></td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>(\$420.00)</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>(\$950.00)</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>(\$1480.00)</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>(\$2010.00)</td><td>\$ _____</td></tr></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>08-2525</u>.</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p><u>11/18/2003</u> Date</p> <p> Signature John P. Parise Typed or printed name</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p>				<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	(\$110.00)	\$ <u>110.00</u>	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	(\$420.00)	\$ _____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	(\$950.00)	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	(\$1480.00)	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	(\$2010.00)	\$ _____
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